

# COMPANION KIT OF FORMS

This set of forms will assist in the development of a Monitored Exchange Program in your community.

There are two appendices.

Appendix A is comprised of **Forms To Create and Open a Monitored Exchange Program.**

Appendix B includes **Operational Forms.**

Be sure to contact the Clearinghouse if you have questions about these forms.

## A TOOLKIT FOR MONITORED EXCHANGE SERVICES



INSTITUTE FOR  
FAMILY VIOLENCE STUDIES  
COLLEGE OF SOCIAL WORK  
FLORIDA STATE UNIVERSITY

# **A P P E N D I X**

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## **A**

### **Forms to Create and Open a Monitored Exchange Program**

## Information About Applying for Tax-Exempt Nonprofit Status 501(c)(3)

In order to apply for tax-exempt nonprofit status, a monitored exchange program should take the following steps.

1. Apply for State of Florida status as a private non-profit corporation. This process involves writing and filing articles of incorporation in compliance with Florida Statutes Chapter 617. Contact the Florida Department of State, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314, (850) 245-6052, [www.myflorida.com](http://www.myflorida.com), for more information about how to do this. There is a filing fee.
2. Read U.S. Department of the Treasury, Internal Revenue Service Publication 557 for language needed in the articles of incorporation in order to qualify for federal tax-exempt status. Print this publication out from the website: [www.irs.gov](http://www.irs.gov)
3. Contact the Florida Department of Revenue, (850) 487-4130, for information about exemption from State of Florida taxes.
4. Obtain an Employer Identification Number (EIN) by applying for one using Form SS-4. The form can be printed from the IRS website, [www.irs.gov](http://www.irs.gov)
5. File Form 1023, Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code, with the IRS.

## Estimated Cost of Operating a Monitored Exchange Program

The following is a breakdown of the estimated cost of operating a monitored exchange program for **one year** if it serves eight families at a time and is open for one hour of exchanges on Friday and one hour of exchanges on Sunday.

ITEM	COST
<b>STAFF</b>	
Uniformed law officer: three hours x two days (Friday and Sunday) at \$25.00 an hour (most law officers charge for a minimum of three hours) x 50 weeks (allowing for the program to be closed two week ends a year for holidays).	7,500.00
Program administrator: two hours x two days (Friday and Sunday) and two hours of additional administrative time at \$25.00 an hour x 50 weeks.	7,500.00
20 hours to conduct training of exchange monitors two times a year x \$25.00 an hour.	1,000.00
FICA - 7.65% of salary	650.00
Workers' compensation – salary/100 x .59 x .68	34.00
Exchange monitors: four monitors (each monitor assigned to monitor two families during each session of exchanges) x 1.5 hours x two days x \$15.00 an hour x 50 weeks.	9,000.00
FICA - 7.65% of salary	689.00
Workers' compensation – salary/100 x .59 x .68	36.00
Training materials for exchange monitors: 12 monitors a year x \$15.00 per training manual.	180.00
Office supplies, postage, copies.	600.00
General liability and property insurance	3,069.00
<b>TOTAL</b>	<b>30,258.00</b>

## Sample Monitored Exchange Needs Assessment for New Program(s)

**Overview:** For the past few months, court staff, domestic violence center advocates, child welfare workers, law enforcement officers, staff from our local batterers' intervention program, even the manager of the local Wal-Mart (parents have been using the parking lot here to exchange children and the manager is concerned about safety of his customers since a couple of families have argued loudly during these exchanges disturbing others in the parking lot), have been meeting to discuss the possibility of creating a monitored exchange program in our community. We have decided to conduct a needs assessment to determine what others involved with child custody litigation and domestic violence in our community feel about this. As part of our needs assessment process, we are asking a number of key individuals to take a few moments and complete this survey. Your cooperation will greatly assist us in our effort to determine whether our community could benefit from a program providing monitored exchange to families involved in child custody litigation and affected by domestic violence.

1. What is your position or title? \_\_\_\_\_
2. What agency or organization do you work for?
3. Do you know what "monitored exchange" is?  Yes  No
4. How would you rank the need for monitored exchange services in our community?  
 High  Medium  Low  Don't Know
4. How is monitored exchange currently made available in our community?  
 Monitored by a relative or friend  
 Exchange at police department or public place (Wal-Mart)  
 Monitored at the local child welfare agency  
 Use of a guardian ad litem or CASA volunteer  
 Privately paid exchange monitor  
 Other, please specify \_\_\_\_\_

5. Which of the following services do you feel should be provided locally?

(Check all that apply)

Monitored exchanges

One-on-one monitored exchanges (one monitor to one family)

Group monitoring (one exchange monitor to several families)

Other service, please describe \_\_\_\_\_

6. Please rank order from the most important monitored exchange service listed above to the least in terms of services you would like to see available in the next year.

7. How often do you think monitored exchange services should be available locally?

Monday through Friday afternoon and evenings

Friday and Sunday all day

Friday and Sunday afternoons only

Some part of each day all week

Other time, please specify

9. Which of the following topics should exchange monitors receive training in prior to observing exchanges? (This will assist us in staff development plans). Indicate all the topics you feel are important for exchange monitors to have. Then rank order from the most important to the least.

Child maltreatment issues (child neglect, physical abuse, emotional abuse, sexual abuse)

Overview of domestic violence

Child development

Parental mental illness and its impact upon children

High conflict families

Culturally diverse families

Requisite skill base for providing monitored exchange

- Documenting service provision
- Working with the court, child welfare agencies, domestic violence center staff and others
- Communication skills
- Operational procedures
- Recognizing ethical dilemmas involved in monitored exchange
- Safety considerations

10. In domestic violence cases, when do you feel it is appropriate to provide or to offer monitored exchange services?

- When the temporary injunction is ordered by a judge
- When the permanent injunction is ordered by a judge
- While the batterer is attending a batterers' intervention program
- While the victim is in shelter
- If either the victim or the batterer desires it
- Not in cases involving an Injunction for Protection Against Domestic Violence
- Other time, please specify

11. Which of the following possible security measures should be instituted at a new monitored exchange program? (Indicate all that may be appropriate and then rank order from the most important to the least.)

- Law enforcement present for all exchanges
- Staff required to have documented training on specific security topics
- Metal detector available for use when parents come into the exchange building
- Video camera used inside the building
- Video camera used outside the building
- All exchanges videotaped
- Only paid staff (not volunteers) monitor exchanges

- One monitor per family
- Alcohol screening done of parents prior to exchange

12. Would you be willing to assist the local effort in establishing a monitored exchange program by volunteering to do any of the following?

- Serve on the board of directors
- Help identify others to serve as advisory committee members or board members
- Provide training to staff and volunteers
- Donate equipment or supplies
- Review program policies and procedures to ensure cultural sensitivity
- Identify community or civic groups who might want to “adopt” this effort
- Volunteer in another capacity, please specify \_\_\_\_\_

Thank you for your assistance in completing this survey. If you would like to have a copy of our results, please include your mailing information below. If you would like to share other ideas or concerns about monitored exchange, please feel free to write them below or call us at 123/335-5678.



## Equipment for a Monitored Exchange Program

**A monitored exchange program may need the following equipment:**

### Office equipment

- Desks
- Chairs
- Computer and printer
- Copy machine
- Storage cabinets for supplies
- File cabinets that lock
- Telephone
- Fax machine
- Television to record exchanges
- Videotape player
- Moveable cart for the television and videotape player
- Videotape rewinding machine
- Surveillance monitors and cameras for outdoors and indoors

### Office supplies

- Paper
- Pens
- Pencils
- Printer ink
- Telephone message pads
- Rubber bands
- Paper clips
- Files
- File labels
- File prongs
- Dividers for file cabinets
- Blank videotapes
- Envelopes of several sizes
- Postage
- Return address labels
- Name tags for staff

### Waiting room and exchange room supplies

- Chairs
- Tables

# Monitored Exchange Program Records

## Management

The program should review its contracts for providing services in order to follow contract provisions regarding records. Monitored exchange programs should keep all records for a period of at least 5 years from the last recorded activity, or until the child reaches the age of majority, whichever occurs first.

## Types

There are several types of records a monitored exchange program should maintain.

## Personnel

The monitored exchange program should have a written personnel record for each employee and each volunteer, including, but not limited to:

1. application and/or resume;
2. job title/description;
3. law enforcement records check results;
4. copy of photographic identification recognized in this state for the purpose of indicating a person's true name and age;
5. documentation of employee or volunteer's satisfactory completion of minimum training requirements;
6. employment references;
7. performance evaluations; and
8. any other documents obtained or created by the program pertaining to the employee or volunteer.

## Client and Case

The program should have the following written information regarding the clients and their cases:

1. parent and child information including:
  - name;
  - address (street, city, county, zip code);

- date of birth;
- race;
- gender;
- phone numbers;
- attorneys names, phone numbers, and addresses;
- income of parents;
- employer's name and phone number;
- safety and medical concerns;
- relationship of each adult to the children;
- whether the biological parents are married, divorced, separated, or never married;
- last 4 digits of Social Security number;
- whom the children are residing with, the caretaker's contact information, and relationship to the child;
- photo identification;
- professional assessments and evaluations when available (alcohol, drugs, domestic violence, risk, parenting, mental health);
- certificates of completing treatment programs;
- criminal background information regarding parents
- who is authorized to transport a child or be their alternate custodian for drop off and pick up; and
- photograph of alternate custodian, except authorized agent of the Department of Children and Family Services.

2. case information, including:

- case name;
- case number;
- division of the court;
- reason for referral;
- court orders; and
- referral form.

3. written correspondence, phone notes, back up materials from parents for excused absences

4. information generated by the monitored exchange program, such as:

- observation reports of exchanges;
- notices of cancellations and no-shows;
- summaries of attendance and nonattendance;
- notices of suspension or termination; and
- payment of fees for services.

### **Videotapes**

The monitored exchange program should have a procedure in place for videotaping exchanges when it is court ordered to record them. There must also be a protocol for copying them and providing copies to parents and their attorneys, as well as for storing them in a locked cabinet.

### **Program Data**

The Clearinghouse gathers case data from supervised visitation and monitored exchange programs in Florida. Programs are asked to input data on a monthly basis. The data is confidential.

### **Financial Records**

The monitored exchange program should maintain appropriate and accurate financial records and follow generally accepted accounting principles.

### **Operational Policies and Procedures**

The program have written operating policies and procedures available for review, upon request as discussed previously.

## Model Letter of Agreement for Monitored Exchange Programs & the Court

This Letter of Agreement outlines specific criteria to be used by the 2<sup>nd</sup> Judicial Circuit, DCF, and Sunshine Monitored Exchange Program.

### ***The Second Judicial Circuit agrees to the following:***

1. To work with staff of Sunshine Monitored Exchange Program to establish policies and guidelines.
2. To authorize Sunshine Monitored Exchange Program staff to accept or decline referrals. Programs shall decline to accept a case for which they can not reasonably ensure the safety of all clients, program staff, and volunteers, including but limited to the following reasons:
  - a. The volatile nature of the case or client.
  - b. Monitored exchange supervisors are not adequately trained to manage issues identified in the intake.
  - c. Facilities are not adequate to provide the necessary level of security.
  - d. Insufficient resources.
  - e. Conflict of interest.
3. To establish a timely mechanism for review of cases referred to Sunshine Monitored Exchange Program.
4. To establish protocols for appropriate communication between the court and the monitored exchange program.
5. To pay for any services needed to accommodate a family's language barriers, including sign language interpreters, and foreign language interpreters.

### ***Sunshine Monitored Exchange Program agrees to the following:***

1. Insure that all staff who monitor exchanges have specific training, documented in personnel files.
2. Accept only those referrals in which staff have the requisite case background material, training, and security in place to safely monitor exchanges.
3. Decline referrals when staff lack necessary training or education, when background material has not been received, or there is a lack of appropriate security.
4. Establish guidelines for staff to utilize in monitored exchanges.
5. Develop policies for handling and reporting of critical incidents.
6. Develop and enforce rules for cases.
7. Suspend exchanges in cases when an exchanging parent engages in inappropriate behavior or violates exchange rules.

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**Judge's Signature or Court Administrator**

**Date**

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**Program Director's Signature**

**Date**

## Sample Interagency Agreement

THIS AGREEMENT, made and entered into on this 5th day of March, 2006, by and between the Florida College University School of Social Work and the Sunshine Exchange Program.

WITNESSETH:

WHEREAS the Sunshine Exchange Program provides a neutral setting in which monitored exchanges can occur pursuant to court order in family court and dependency cases.

WHEREAS the Sunshine Exchange Program has relied since May, 1995, on the Florida College University School of Social Work to provide training of exchange monitors and for Social Work students to volunteer at the Sunshine Exchange Program.

NOW THEREFORE, the parties hereby agree as follows:

1. The Florida College University School of Social Work (hereinafter referred to as the "School") agrees to train exchange monitors hired by The Sunshine Exchange Program through June 30, 2007. The training shall include the following subjects: parenting skills, parental alienation, child development, child abuse and neglect, cultural diversity, crisis intervention, confidentiality, security procedures, emergency procedures, dynamics of divorce, substance abuse, mental health profiles, observation and recording of exchanges, and dynamics of domestic violence.
2. The School will continue to participate in the drafting of policies and procedures governing the program.
3. The School will continue to provide a liaison faculty member to ensure that information regarding the training of exchange monitors is provided on a regular basis to the Director of the Sunshine Exchange Program.
4. The School will provide the Program Director office space and space for the monitored exchanges at 200 Sunshine Street, Sunnyside, FL, throughout 2006 and 2007.

ATTEST:

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Jane Smith, PhD.  
Dean  
School of Social Work  
Florida College University

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Michael Jones  
Director,  
Sunshine Exchange Program

# Interagency Agreement

## Building Services

THIS AGREEMENT, made and entered into on this 5th day of March, 2006, by and between the Florida College University School of Social Work and the Sunshine Exchange Program.

WITNESSETH:

WHEREAS the Sunshine Exchange Program provides a neutral setting in which monitored exchanges can occur pursuant to court order in civil family and dependency cases.

WHEREAS the Sunshine Exchange Program has relied since May, 1995, on the Florida College University School of Social Work to provide training for its staff.

WHEREAS The School has agreed to provide the Program Director with office space and the Program with space for the monitored exchanges at 200 Sunshine Street, Sunnyside, FL, through June 30, 2007.

NOW THEREFORE, the parties hereby agree as follows:

1. Florida College University (hereinafter referred to as FCU) agrees to provide the utilities used by the Program at the building.
2. FCU agrees to provide regular, routine pest control services at the building, including indoor pest control as well as outdoor pest control for the lawn and parking lot areas.
3. FCU agrees to provide regular, routine maintenance of the Building and regular, routine cleaning services for the Building.
4. FCU agrees to provide regular, routine lawn services for the Building grounds.
5. The Program agrees to keep the FCU informed of things that need to be done to maintain the Building and grounds.

ATTEST:

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Jane Smith, PhD.  
Dean  
School of Social Work  
Florida College University

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Michael Jones  
Director,  
Sunshine Exchange Program

## List of Policies and Procedures

Examples of the policies and procedures which should be written are:

Program Structure/Administration:

- staff positions
- job descriptions/roles and responsibilities
- chain of authority

Types of Services

Include all services the program offers, such as:

- monitored exchange
- supervised visitation
- supervised telephone access

Referral Process

- sources of referrals that the program accepts
- documents required
- notification from referring source to program
- notification from program to source that case is accepting/declined
- what happens when a family is referred

Waiting List

- when is one used
- process for putting case on it: notification, how program keeps track of case
- length of time for case to be on it
- how a case moves into receiving services

Accepting and Declining Cases

- criteria for accepting
- criteria for declining
- case information required
- intake interviews
- who makes decision
- steps in decision making
- communicating decision to referral source and clients

Communication with the Court and Other Agencies

- what information must be communicated
- time frame of communicating
- method of communicating
- inappropriate communication (ex parte)
- who does the communicating
- reports



## Rules for Client Behavior

- list of
- how notice is given to parents and children
- notification to court, attorneys, other agencies
- how rules are added or deleted
- intent of
- reasons for

## Payment of Fees

- who pays
- how waived
- procedure for collecting
- how program will spend
- consequences of not paying, enforcement of
- amount of
- method for changing

## Hours of Operation

- when program is open for services
- when program is open for administrative business
- process for notification of
- holidays
- emergency closings, notification of

## Provision of Services

- for clients (children and adults) with disabilities
- for clients who speak languages other than English, including sign language: who pays for translators, how are they arranged for, staff and translator roles

## Security

- type of
- job description: duties, responsibilities, skills, abilities
- training
- rules regarding
- devices
  - the building
  - information in files
  - funding and payment for

## Emergencies

- roles of staff
- roles of volunteers
- expectation of clients, notification of
- procedures for evacuation
- security during
- types of (medical, weather, violence, fire and other natural emergencies)
- practice drills, frequency
- documentation regarding

## Grievance

- who may file a grievance
- how to file a grievance, written, forms
- whom to file it with
- process for decision-making regarding it
- notification of decision
- consequences of for staff who is grieved against
- time limits

## Confidentiality

- what records and communications are confidential
- release of records and process for release
- code to be signed by staff and volunteers
- consequences of violating
- laws and contract provisions governing

## Records management (See Monitored Exchange Program Records above.)

- who is custodian of records
- what records will be kept
- how records will be kept, where
- how long records will be kept
- release of records and process for that (who, when, what, how, fee for copying and mailing)

## Employment of Staff, Volunteers

- positions and descriptions of them
- qualifications
- recruitment
- training (who, what, where, when, how)
- retention
- termination: procedure for, reasons for

## Data Collection

- staff designated to conduct
- participation in Clearinghouse database
- frequency of
- how conducted
- who gets information

## Length of time a family is allowed to use the program

## Discharge and termination of cases

- criteria for
- who decides
- notification to referral source and clients

## Location

- handicapped accessible
- access to public transportation
- compliance with building and safety codes
- maps for clients

**In the Circuit Court of the Second Judicial Circuit of Florida,  
in and for Sunshine County**

**FAMILY DIVISION CASE NUMBER:**

**IN RE THE MARRIAGE OF:**

**Petitioner,  
and  
Respondent,** \_\_\_\_\_

**ORDER FOR MONITORED EXCHANGE AT THE SUNSHINE FAMILY PROGRAM**

The court hereby orders that:

1. The parties participate in the Sunshine Family Program Monitored Exchange Program for the following children:

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

2. The Sunshine Family Program shall schedule a monitored exchange appointment for the parties to begin on (date) \_\_\_\_\_, or as soon thereafter as the Program has an opening.

3. The monitored exchange will take place (circle or fill in the blank):

Biweekly \_\_\_\_\_

(other)

and continue until (circle or fill in the blank)

further order of the Court \_\_\_\_\_

(give the date)

4. The exchanges shall take place at the Sunshine Family Program's location at 200 Sunshine Street, Sunnyside, FL , 32356.
5. The parties shall contact the Program when this order is signed to be advised of an opening by the Program Director. The parties may call the Director at (123) 335-5678 or contact her by mail at P.O. Box 1234, Sunshine, FL 32356, to initiate the exchanges.

6. The cost of the monitored exchange is (circle one):

\$20.00 per weekend                      waived

and shall be paid by (circle one): petitioner/respondent/both prior to the exchange.

Checks are to be made payable to Sunshine Family Program.

Mail to: Sunshine Family Program, P.O. Box 1234, Sunshine, FL 32356

7. Failure to pay the fee may result in the court issuing a judgment against the responsible party.

8. The parties are ordered to follow the directives of the staff of the Sunshine Family Program. The Program rules are attached.

9. The parties shall also follow the following terms and conditions specific to their case:

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10. The Sunshine Family Program is authorized to cancel a monitored exchange and suspend or terminate the parties' use of the Program when staff deems necessary.

11. The parties are ordered to notify the Sunshine Family Program at least 48 hours in advance if they cannot keep a scheduled appointment. Failure to do so will result in the parties being required to pay for the appointment. If two appointments are cancelled by either party, no additional appointments will be scheduled until further order of the court.

12. The custodial parent will be assessed a fee of \$1.00 per minute for failure to pick up the child(ren) after the visit.

13. The Sunshine Family Program shall notify the court of parental noncompliance with the Program's rules and procedures. The court may consider the parents' noncompliance in making future decisions regarding the children and parents.

14. The parties must contact the Program to begin monitored exchanges within six months of the signing of the order, otherwise the order expires six months from the date it is signed.

15. If the noncustodial parent, (print name), who is required to return the child to the custodial parent through a monitored exchange fails to do so, law enforcement authorities, including, but not limited to The Sunshine Police Department and the Sun County Sheriff's Department, are hereby directed and authorized to return the child, (print child's name), to the custodial parent, (print custodial parent's name), or, if that parent is not immediately available, to the Sunshine Family Program.

DONE AND ORDERED at Sunshine, Sun County, Florida, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_ Circuit Judge

*Copies furnished to:* Sunshine Family Program, Attorney, Attorney, Petitioner, Respondent

## Conflict of Interest Checklist

When deciding to accept or decline a referral, the monitored exchange program should consider if any of the following conflicts of interest exist:

- staff knows any of the clients,
- staff has worked for any of the clients,
- clients have worked for any of the staff,
- staff is serving as a volunteer guardian ad litem on the family's case, and/or
- staff has any kind of relationship with the client, such as friendship, romantic relationship, kinship.

## Procedure for Termination of an Exchange

The monitored exchange program will need a procedure for refusing to allow an exchange or terminating one. The following procedure could be used.

- Refusal of an exchange to the visiting person upon arrival at the building shall be the decision of the director or case supervisor. The reason for refusal shall be noted in an incident report and signed by the security officer and director or case supervisor.
- Checklist for initial screening of noncustodial parent including, but not limited to:
  - a. smell of alcohol;
  - b. staggering;
  - c. speech slurred;
  - d. conversation impaired or inappropriate;
  - e. eyes glossy or bloodshot;
  - f. behavior belligerent, confrontational or bizarre; and/or
  - g. carrying a weapon.
- In crisis situations during the exchange, either the director, case supervisor, exchange monitor, or the security officer may unilaterally terminate the exchange.
- In difficult, but non-crisis, situations, the monitor should use the following progressive method:
  - a. warn the parent about a specific behavior;
  - b. if it continues, involve the security officer, director, and or case supervisor; and
  - c. the director, and/or case supervisor in consultation with the security officer if needed, terminate the exchange, and record the incident stating the reason for termination.
- The parent should be taken out of the child's presence to address the inappropriate behavior, if necessary.

## Specialized Sills and Abilities for Security Staff

Security staff should also have the following skills and abilities:

- ability to deal effectively with individuals, including children and adolescents;
- ability to recognize signs of fear/intimidation in adults and children;
- ability to recognize dangerous or potentially dangerous situations;
- ability to investigate suspicious or unusual events;
- ability to respond calmly in an emergency situation and to determine proper course of action;
- ability to manage violent individuals;
- ability to communicate effectively;
- ability to read, interpret, and apply regulatory materials;
- ability to work without close supervision and to make independent decisions regarding security issues; and
- skill in the use and care of firearms.

# **A P P E N D I X**

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## **B**

### **Operational Forms**



## Intake Interview Sheet

Parent's Name: \_\_\_\_\_

Check one:  custodial parent  noncustodial parent

Names of children who will be exchanged: \_\_\_\_\_

Why did the court order you to use a monitored exchange program? \_\_\_\_\_

List any open court cases involving you, the other parent, and your children (juvenile dependency, delinquency, criminal, Injunction for Protection Against Domestic Violence, dissolution of marriage, paternity, other):

When, where, and under what circumstances was the last time the visiting child saw/spent time with the visiting parent?

Give a brief history of the relationship between the each parent and the children involved, including past frequency of contact, caretaking, etc.:

How do you feel about your child's relationship with the other parent?

Is the child likely to be comfortable or become comfortable with the exchanges?

Are there any issues that may arise during the exchanges?

To what extent has the child been exposed to conflict between you and the other parent?

Does either parent have a criminal history?

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Are any of the following present in this case?

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Domestic violence   | <input type="checkbox"/> Drug abuse        | <input type="checkbox"/> Mental illness |
| <input type="checkbox"/> Alcohol abuse       | <input type="checkbox"/> Abduction threats | <input type="checkbox"/> Physical abuse |
| <input type="checkbox"/> Neglect/abandonment | <input type="checkbox"/> Other _____       |   |

Have you ever, or are you currently attending any of the following:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Parenting class                             | <input type="checkbox"/> Domestic violence support group |  |
| <input type="checkbox"/> Batterer's intervention                     | <input type="checkbox"/> Alcoholics' Anonymous           | <input type="checkbox"/> Narcotics Anonymous |
| <input type="checkbox"/> Support group for families of abuse victims | <input type="checkbox"/> Counseling                      |  |

Would you be interested in attending the above? If yes, which one?

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Are you receiving support regarding this situation from any of the following:

- |                                     |  |   |
|-------------------------------------|--|---|
| <input type="checkbox"/> Friends    | <input type="checkbox"/> Religious leaders | <input type="checkbox"/> Family members |
| <input type="checkbox"/> Co-workers | <input type="checkbox"/> Other _____       |   |

Is the visiting child receiving any of the following services?

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Psychological counseling | <input type="checkbox"/> Group treatment | <input type="checkbox"/> Play therapy |
| <input type="checkbox"/> Support group            | <input type="checkbox"/> Other _____     |                                       |

What agencies are involved in this case?

- |  |  |
|--|--|
| <input type="checkbox"/> Dept. of Children and Family Services | <input type="checkbox"/> Child Protection Team |
| <input type="checkbox"/> Other _____                           |  |

How do you think the monitored exchange program will help you?

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What is your current relationship to the child's other parent?

- |                                  |                                   |                                    |  |
|----------------------------------|-----------------------------------|------------------------------------|--|
| <input type="checkbox"/> married | <input type="checkbox"/> divorced | <input type="checkbox"/> separated | <input type="checkbox"/> never married |
|----------------------------------|-----------------------------------|------------------------------------|--|

If divorced or separated, for how long? \_\_\_\_\_

Are you currently engaged or remarried? If yes, give partner's name:

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## Sunshine Monitored Exchange Program Rules

1. I will be scanned with a metal detector by a deputy each time I come to the center.
2. I will arrive for and end all monitored exchanges on time.
3. I will not bring anyone not listed in the court order to the monitored exchange.
4. I will present proper identification (a driver's license or identification card) each time I come to the center.
5. I understand I must show my valid driver's license to the security staff before I will be allowed to pick up my child(ren).
6. I will not bring guns, knives, or any other weapon to the center.
7. I will not smoke at the center.
8. I will not bring a cell phone, beeper, camera, recorder of any type, or any other electronic device into the center.
9. I will not attempt to exchange any items with the other parent at the center, such as money or child support. (what about items the child needs for the weekend?)
10. I will not bring food or beverages other than sealed bottled water into the center.
11. I understand that if I arrive under the influence of alcohol or drugs, or am suspected of being under the influence, my exchange will be terminated.
12. I will call The Sunshine Visitation Program by 10 a.m. the Thursday prior to the scheduled exchange in the event that I must cancel the exchange.
13. I understand that if I am classified as a "no show" for two (2) consecutive exchanges, my exchanges will be terminated, pending a new court order and a letter will be sent to the judge. A "no show" is defined as an unexcused failure to attend the exchange. If I cancel two (2) exchanges within a thirty (30) day period this same procedure will be followed. May or may not want to include that.
14. I will pay all fees prior to each exchange. All fees paid to The Sunshine Visitation Program are nonrefundable. Checks should be made out to Sunshine Visitation Program.
15. I will not use corporal punishment at the center.
16. I may designate an alternate custodian for the drop off of my child if I am the nonresidential parent; however, I must pick the child up myself.
17. I may designate an alternate custodian for the drop off and retrieval of my child if I am the residential parent only after I have completed the required paperwork.
18. I understand that if my child(ren) are of an age that the law requires them to ride in a car seat and I do not bring a car seat to the exchange, the child will be returned to the other parent and no exchange will take place. If I do not bring a car seat to the exchange more than once, my use of the program may be terminated.
19. I will inform the program of any changes in my address or phone number.
20. If the nonresidential parent is more than 15 minutes late, the exchange will be canceled.
21. On the return exchange, if the residential parent does not arrive to pick up the children before the center closes, the children will go home with the noncustodial parent.

22. I understand that exchanges will be documented as well as no-shows, cancellations, and tardiness.
23. I agree to bring and return all of the children's needed items, such as medication, eye glasses, school supplies, homework, etc.

I have read and fully understand the above rules. Any violations of these rules or other policies announced by the staff can result in termination of the exchange and/or from the program.

---

Print name

Parent's signature

Date

---

Print name

Witness's signature

Date

## Notification Letter to the Referral Source

### The Sunshine Family Program

200 Sunshine Street

Sunnyside, FL 24305

Phone 123/335-5678 Fax 406/222-0003

June 1, 2008

The Honorable Judge Redfield  
Sun County Courthouse  
Sunnyside, FL 24305

RE: Clark/Clark, Sun County Case No. 1234

Dear Judge Redfield,

Per our letter of agreement between The Sunshine Family Program and the Second Judicial Circuit, we have determined that the Program cannot provide monitored exchange services in this case for the following reasons:

---

---

or

Per our letter of agreement between The Sunshine Family Program and the Second Judicial Circuit, we have determined that the Program can provide monitored exchange services in this case.

Sincerely,

Michael Jones, Program Director

Copies to:

- Custodial parent
- Noncustodial parent
- Custodial parent's attorney
- Noncustodial parent's attorney
- Guardian ad Litem
- Court file

## Letter to Begin Exchanges / Residential Parent

**The Sunshine Family Program**  
200 Sunshine Street  
Sunnyside, FL 24305  
Phone 123/335-5678 Fax 406/222-0003

June 1, 2008

Mr. Clark  
222 Evan Lane  
Sunnyside, FL 24305

RE: Clark/Clark, Sun County Case No. 1234

Dear Mr. Clark,

On May 25, 2005, the Honorable Judge Redfield ordered that you participate in a monitored exchange of your children. You are scheduled to bring the children to the exchange site at 200 Sunshine Street, Sunnyside, FL 24305 (see enclosed map) on:

---

Day	Date	Time
-----	------	------

You are to pick up the children at the end of the visit on:

---

Day	Date	Time
-----	------	------

If you do not pick up the children before the site closing, the children will be sent home with the nonresidential parent. The exchange of the children will then have to take place at the Sheriff's Department at a later time to be arranged by you.

If you cannot keep the scheduled appointment, you must notify the Sunshine Family Program as soon as possible at (123) 335-5678.

Enclosed for you to read are the following:

- Sun Monitored Exchange Program rules
- Map to exchange site

Please follow all rules and court orders. You need to call the office at (123) 335-5678 by 3:00 p.m. on the Thursday before the date of the exchange to confirm your appointment. We look forward to seeing you on your scheduled date.

Sincerely,

Michael Jones, Program Director

## Letter to Begin Exchanges / Nonresidential Parent

**The Sunshine Family Program**  
200 Sunshine Street  
Sunnyside, FL 24305  
Phone 123/335-5678 Fax 406/222-0003

June 1, 2008

Mrs. Clark  
222 Evan Lane  
Sunnyside, FL 24305

RE: Clark/Clark, Sun County Case No. 1234

Dear Mrs. Clark,

On May 25, 2005, the Honorable Judge Redfield ordered that you participate in a monitored exchange of your children. You are scheduled to pick up the children at the exchange site at 200 Sunshine Street, Sunnyside, FL 24305 (see enclosed map) on:

---

Day	Date	Time
-----	------	------

You are to return the children at the end of the visit on:

---

Day	Date	Time
-----	------	------

It is mandatory that you arrive on time. If you are more than 15 minutes late, it will be necessary to send the children home with the residential parent.

If you cannot keep the scheduled appointment, you must notify the Sunshine Family Program as soon as possible at (123) 335-5678.

Enclosed for you to read are the following:

- Sun Monitored Exchange Program rules
- Map to exchange site

Please follow all rules and court orders. You need to call the office at (123) 335-5678 by 3:00 p.m. on the Thursday before the date of the exchange to confirm your appointment. We look forward to seeing you on your scheduled date.

Sincerely,

Michael Jones, Program Director

# Exchange Day Information Form

Children ages birth to 12 years

Child's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Meals and food: \_\_\_\_\_

\_\_\_\_\_

Naps: \_\_\_\_\_

Diaper changes/Toilet training: \_\_\_\_\_

\_\_\_\_\_

Medications: \_\_\_\_\_

\_\_\_\_\_

Illnesses: \_\_\_\_\_

\_\_\_\_\_

Homework or extracurricular activities that need to be complete: \_\_\_\_\_

\_\_\_\_\_

Clothing: \_\_\_\_\_

\_\_\_\_\_

Belongings that need to be returned: \_\_\_\_\_

\_\_\_\_\_



# Exchange Day Information Form

Children ages 13 to 18 years

Child's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Meals and food: \_\_\_\_\_

\_\_\_\_\_

Medications: \_\_\_\_\_

\_\_\_\_\_

Illnesses: \_\_\_\_\_

\_\_\_\_\_

Homework or extracurricular activities that need to be complete: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Clothing: \_\_\_\_\_

\_\_\_\_\_

Belongings that need to be returned: \_\_\_\_\_

\_\_\_\_\_

# Notice of Termination of Monitored Exchange

The Sunshine Family Program

Address

Phone

To: \_\_\_\_\_ parent or custodian  
\_\_\_\_\_ parent

From: \_\_\_\_\_ Director      Date: \_\_\_\_\_

RE: Case no. \_\_\_\_\_ RE: Termination of Monitored Exchange

This is to notify you that the monitored exchange between \_\_\_\_\_ and \_\_\_\_\_ at the

\_\_\_\_\_ Program was terminated on \_\_\_\_\_ (date) for the following reasons (or attach Critical Incident Report). Therefore, all future exchanges have been suspended until further court order. If you do not seek to challenge this suspension by returning to court, your exchanges will be terminated, and your file will be closed effective thirty days from the date of this suspension.

Notices sent to:

- Judicial Assistant (Judge's Office)
- Court file (Clerk of Court)
- Guardian ad Litem
- Mother
- Mother's Attorney
- Father
- Father's Attorney
- Other \_\_\_\_\_

## Critical Incident Report

Name of person filing out form: \_\_\_\_\_

Date of incident: \_\_\_\_\_

Case name and number: \_\_\_\_\_

Put explanation lines after each.

\_\_\_\_\_ Arrival / Departure \_\_\_\_\_

\_\_\_\_\_ Bringing weapons onsite \_\_\_\_\_

\_\_\_\_\_ Trying to elicit information about the other parent \_\_\_\_\_

\_\_\_\_\_ Confrontational / uncooperative with staff \_\_\_\_\_

\_\_\_\_\_ Property damage \_\_\_\_\_

\_\_\_\_\_ Inappropriate language \_\_\_\_\_

\_\_\_\_\_ Under the influence of alcohol or drugs \_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_

**Did the incident result in termination of the exchange?** (If yes, attach this form to the *Notice of Termination*)

\_\_\_\_\_

Describe where the incident took place, what staff did to intervene, and name any witnesses:

\_\_\_\_\_

\_\_\_\_\_  
Signature and title of person preparing report

\_\_\_\_\_  
Signature of program director

**Sunshine Family Program  
Monitored Exchange Attendance Sign In & Check List**

**PHASE I OF EXCHANGE**

Appointment Date: \_\_\_\_\_ Case Name: \_\_\_\_\_ Appointment Time: \_\_\_\_\_

**Visiting Party – Picking Up Child(ren)**

Name: \_\_\_\_\_ relationship to child(ren) \_\_\_\_\_

Arrival Time: \_\_\_\_\_ (this time is entered by the program)

Party's signature: \_\_\_\_\_

*I hereby acknowledge the above stated time is my time of arrival at the SFP*

**CONTACTS**

Time:	Person calling / Information taken by:	SFP Record of Information:

**Custodial / Party – Dropping Off Child(ren)**

Name: \_\_\_\_\_ relationship to child(ren) \_\_\_\_\_

Arrival Time: \_\_\_\_\_ (this time is entered by the program)

Party's signature: \_\_\_\_\_

*I hereby acknowledge the above stated time is my time of arrival at the SFP*

**CONTACTS**

Time:	Person calling / Information taken by:	SFP Record of Information:

**SFP PERSONNEL:** \_\_\_\_\_

**Sunshine Family Program  
Monitored Exchange Attendance Sign In & Check List**

**PHASE II OF EXCHANGE - return of children**

Appointment Date: \_\_\_\_\_ Case Name: \_\_\_\_\_ Appointment Time: \_\_\_\_\_

**Visiting Party – Returning Child(ren)**

Name: \_\_\_\_\_ relationship to child(ren) \_\_\_\_\_

Arrival Time: \_\_\_\_\_ (this time is entered by the program)

Party's signature: \_\_\_\_\_

*I hereby acknowledge the above stated time is my time of arrival at the SFP*

**CONTACTS**

Time:	Person calling / Information taken by:	SFP Record of Information:

**Custodial / Party – Picking Up Child(ren)**

Name: \_\_\_\_\_ relationship to child(ren) \_\_\_\_\_

Arrival Time: \_\_\_\_\_ (this time is entered by the program)

Party's signature: \_\_\_\_\_

*I hereby acknowledge the above stated time is my time of arrival at the SFP*

**CONTACTS**

Time:	Person calling / Information taken by:	SFP Record of Information:

**SFP PERSONNEL:** \_\_\_\_\_

## The Sunshine Family Program Exchange Monitor's Confidentiality Statement

I hereby certify that I will keep all information regarding persons who participate in The Sunshine Family Program confidential. I will not disclose, or participate in the disclosure of, confidential information relating to a case, child, or family to any person who is not a party to the cause, except in Exchange Reports and as provided by law or court order. I will abide by all protections of confidentiality provided to victims of domestic violence. I understand that a violation of confidentiality may result in disciplinary action, up to and including termination. I further understand that I could be subject to legal action.

---

Signature of Exchange Monitor

Date

### EXCHANGE MONITOR CODE OF CONDUCT

The Sunshine Family Program exchange monitor must maintain high standards of conduct in carrying out his or her duties and obligations. The exchange monitor must:

1. diligently use best practices in the monitoring of all families;
2. resist influences and pressures that interfere with impartial monitoring;
3. report honestly and impartially in the Exchange Reports what occurs during exchanges;
4. respect the privacy of the child and the family and hold confidential all information obtained in the course of service as a staff member or volunteer with The Sunshine Family Program, as required by law and Program standards;
5. decline to monitor cases in which he or she may have a conflict of interest;
6. attend pre-service training, and in-service trainings when the monitor has been with the Program long enough for that to be required;
7. not practice, condone, facilitate, or participate in any form of discrimination on the basis of race, color, sex, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical handicap, or any other preference or personal characteristic, condition, or status; and
8. comply with all Program policies.

Failure to comply with the Code of Conduct may result in discipline or discharge. The exchange monitor hereby acknowledges that he/she does not have a right to serve as a volunteer at The Sunshine Family Program, but that he/she serves at the program director's discretion.

---

Signature of Exchange Monitor

Date

The Sunshine Family Program  
AFFIDAVIT OF DISCLOSURE

List any and all active pending **criminal** law suits in which you are named as a party  
(Give case name, county name, judicial circuit, and case number):

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List any and all active pending **civil** law suits in which you are named as a party  
(Give case name, county name, judicial circuit, and case number):

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Signature of Affiant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

My commission expires

NOTARY PUBLIC, STATE OF FLORIDA

My signature, as a Notary Public, verifies the affiant's identification has been validated by

---

## The Sunshine Family Program Exchange Monitor Training Record

Exchange Monitor's Name: \_\_\_\_\_

Training Topic	Date	# of Hours
Child abuse		
Child development		
Child neglect		
Substance abuse		
Mental illness		
Cultural diversity		
Crisis intervention		
Dynamics of divorce		
Parental alienation		
Parenting skills		
Domestic violence		
<b>Orientation Training</b>		
Program policies and procedures		
Practice		
Use of forms		
Confidentiality		
Levels of supervision at the program		
Security and emergency procedures		
Observation techniques		
Recording observations		

Signature of Person Conducting Training: \_\_\_\_\_



## Affidavit of Good Moral Character

State of Florida, County of SUN.

Before me this day personally appeared *Marcus Student* who, being duly sworn, deposes and says: I am an applicant for employment as a caretaker with: *The Sunshine Family Program*. By signing this form, I am swearing that I have not been found guilty or entered a plea of guilty or nolo contendere (no contest), regardless of the adjudication, to any of the following charges under the provisions of the Florida Statutes or under any similar statute of another jurisdiction. I also attest that I do not have a delinquency record that is similar to any of these offenses.

I understand I must acknowledge the existence of any criminal records relating to the following list regardless of whether or not those records have been sealed or expunged. I understand that I am also obligated to notify my employer of any possible disqualifying offenses that may occur while employed in a position subject to background screening under Chapter 435, Florida Statutes.

### Chapters/

#### Sections:

#### Relating to:

Section 415.111	adult abuse, neglect, or exploitation of aged persons or disabled adults
Section 741.30	domestic violence and injunction for protection
Section 782.04	murder
Section 782.07	manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated manslaughter of a child
Section 782.71	vehicular homicide
Section 782.09	killing an unborn child by injury to the mother
Section 784.011	assault, if the victim of offense was a minor
Section 784.021	aggravated assault
Section 784.03	battery, if the victim of offense was a minor
Section 784.045	aggravated battery
Section 784.075	battery on a detention or commitment facility staff
Section 787.01	kidnapping
Section 787.02	false imprisonment
Section 787.04(2)	taking, enticing, or removing a child beyond the state limits with criminal intent pending custody proceedings
Section 787.04(3)	carrying a child beyond the state lines with criminal intent to avoid producing a child at a custody hearing or delivering the child to the designated person
Section 790.115(1)	exhibiting firearms or weapons within 1,000 feet of a school
Section 790.115(2)(b)	possessing an electric weapon or device, destructive device, or other weapon on school property
Section 794.011	sexual battery
Section 794.041	prohibited acts of persons in familial or custodial authority
Chapter 796	prostitution

Section 798.02	lewd and lascivious behavior
Chapter 800	lewdness and indecent exposure
Section 806.01	arson
Chapter 812	felony theft and/or robbery and related crimes, if a felony
Section 817.563	fraudulent sale of controlled substances, if the offense was a felony
Section 825.102	abuse, aggravated abuse, or neglect of disabled adults or elderly persons
Section 825.1025	lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled adult
Section 825.103	exploitation of disabled adults or elderly persons if the offense was a felony
Section 826.04	incest
Section 827.03	child abuse, aggravated child abuse, or neglect of a child
Section 827.04	contributing to the delinquency or dependency of a child
Section 827.05	negligent treatment of children
Section 827.071	sexual performance by a child
Section 843.01	resisting arrest with violence
Section 843.025	depriving an officer means of protection or communication
Section 843.12	aiding in an escape
Section 843.13	aiding in the escape of juvenile inmates in correctional institution
Chapter 847	obscene literature
Section 874.05(1)	encouraging or recruiting another to join a criminal gang
Chapter 893	drug abuse prevention and control only if the offense was a felony or if any other person involved in the offense was minor
Section 944.35(3)	inflicting cruel or inhuman treatment on an inmate resulting in great bodily harm
Section 944.46	harboring, concealing, or aiding an escaped prisoner
Section 944.47	introduction of contraband into a correctional facility
Section 985.4045	sexual misconduct in juvenile justice programs
Section 985.4046	contraband introduced into detention facilities

***One of the following statements must be made:***

Under the penalty of perjury, which is a first degree misdemeanor, punishable by a definite term of imprisonment, not exceeding one year and/or a fine not exceeding \$1,000 pursuant to ss.837.012, or 775.082, or 775.083, Florida Statutes, I attest that I have read the foregoing, and I am eligible to meet the standards of good character for this caretaker position.

---

Signature of Affiant

***or***

To the best of my knowledge and belief, my record may contain one or more of the foregoing disqualifying acts or offenses.

---

Signature of Affiant

**or**

**For teachers and non-instructional personnel in lieu of fingerprint submission:**

I swear that I have been fingerprinted under Chapter 231, Florida Statutes, when employed as a teacher or non-instructional employee and have not been unemployed from the school board for more than 90 days. I swear the findings of that background check did not include any of the above offenses and that I meet the standards of good character for this caretaker position.

---

Signature of Affiant

**or**

To the best of my knowledge and belief, my record may contain one or more of the foregoing disqualifying acts or offenses.

---

Signature of Affiant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

---

My commission expires

NOTARY PUBLIC, STATE OF FLORIDA

My signature, as a Notary Public, verifies the affiant's identification has been validated by

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## List of Steps for Conducting a Criminal Background Check on Volunteers and Staff

1. Obtain the following from the person:
  - a. a completed fingerprint card for background checks regarding children's caretakers. The person must follow the instructions printed on the back of the card for completing it, such as only use black ink to write on the card. The sheriff's department, or city or university police department can make the fingerprints on the card the monitored exchange program provides to the person,
  - b. the names and contact information for at least 2 former employers or references and a release of information in case the employers require one,
  - c. the person's first, middle, and last name; social security number; and date of birth on a local criminal history request form to be submitted to local law enforcement, and
  - d. an *Affidavit of Good Moral Character* which is signed by the person and notarized.
2. contact The Florida Department of Law Enforcement to obtain Fingerprint/Name Search Submission forms and an account number for billing;
3. send the completed fingerprint cards and Fingerprint/Name Search form in to FDLE. FDLE will conduct the statewide check and send in the information for the FBI check;
4. contact the employers and ask the questions contained in the *Sample Employer Reference Check Form*,
5. read the background results as they come in to make sure the person doesn't have any convictions prohibited by law on the *Affidavit of Good Moral Character*,
6. contact the DCF screening employee with any questions, and keep all of the results confidential in a file for each staff/volunteer.

**The Sunshine Family Program  
Staff and Exchange Monitor Employment Reference Form**

Please give the information for 2 employers. If you have never had an employer, please write that on the form. If you have only had 1 employer, please give the information about that employer and then in the space for the second employer, write "have none."

Monitor's full name: \_\_\_\_\_

Date form is completed and given to director: \_\_\_\_\_

**1. Name of employer:** \_\_\_\_\_

Name of supervisor, if different than employer's name: \_\_\_\_\_

Employer's address: \_\_\_\_\_  
\_\_\_\_\_

Employer's phone number: \_\_\_\_\_

Time period during which you were employed (month, year): from \_\_\_\_\_  
to \_\_\_\_\_

Title of position you held: \_\_\_\_\_

**2. Name of employer:** \_\_\_\_\_

Name of supervisor, if different than employer's name: \_\_\_\_\_

Employer's address: \_\_\_\_\_  
\_\_\_\_\_

Employer's phone number: \_\_\_\_\_

Time period during which you were employed (month, year): from \_\_\_\_\_  
to \_\_\_\_\_

Title of position you held: \_\_\_\_\_

## Release of Employment Information

Date:

To: (Business you are requesting employment information from)

I have direct contact with children and parents at The Sunshine Family Program. The law requires that the Program conduct background screenings of staff and volunteers who participate in the Program. Part of the required background screening is checking 2 employment references.

I hereby authorize you to release employment information regarding me to The Sunshine Family Program, 200 Sunshine Street, Sunnyside, FL 24305.

Attached is a form regarding the information the Program needs, please complete it and mail or fax it to the address for The Sunshine Family Program given below, or you may also call Michael Jones at 406-222-0002.

---

Print name

---

Social Security Number

---

Signature

---

Dates of employment

Please return the attached, completed form to:

Mr. Michael Jones  
The Sunshine Visitation Program  
200 Sunshine Street  
Sunnyside, FL 24305  
Fax number (406) 222-0003



## Exchange Monitor Employer Reference Check Form

Exchange Monitor's Name: \_\_\_\_\_

Date form completed: \_\_\_\_\_

Individual completing form: \_\_\_\_\_

Organization contacted: \_\_\_\_\_

Person contacted & title: \_\_\_\_\_

Telephone number of person contacted: \_\_\_\_\_

Dates of employment were from \_\_\_\_\_ to \_\_\_\_\_

Verify:  yes  no

Were you monitor's immediate supervisor?  yes  no

If no, give working relationship: \_\_\_\_\_

Position monitor held with employer: \_\_\_\_\_

Verify:  yes  no

Major duties performed in the job: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Was monitor's work performance satisfactory?  yes  no

Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Did monitor have an absentee record that affected his/her performance or productivity?

yes  no Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Did monitor receive any awards or honors if you have any?  yes  no

Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



Did monitor ever receive any disciplinary action ? If yes, what was nature of offense and what action was taken? Provide date of action.

---

---

Why did monitor leave your organization? \_\_\_\_\_

---

Would you rehire?  yes  no Explain, if no: \_\_\_\_\_

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---

Are you aware of any information that might negatively affect this individual's suitability to work in direct contact with developmentally disabled individuals, the elderly, or children?

yes  no Explain, if yes: \_\_\_\_\_

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## How To Make a 911 Call

- Stay calm
- Inform 911 operator there is a disturbance
- Agency/type of agency, who is in building (kids, clients, staff)
- Tell what the problem is
- Give address (this should be posted on all phones) and phone number, especially if you are calling from your cell phone. They won't know anything if you are on your cell. A land line phone will usually display your address for 911.
- Officer or no officer on site (security guard)
- If officer on site give name and badge number (keep a list of badge numbers by phone)
- Describe what is happening. If officer there and down – “assist officer”. They need to know: threats made, physical contact, weapons, knife, shots fired, fight with officer.....

If things are escalating 911 needs to know – they are updating info to responding officers as you talk. Tell operator how many people are in the building, where they are and if they are safe.

- Stay on the phone as long as you safely can and **leave it off the hook** if you must leave that area, it will record whatever is going on in the background = evidence.
- Describe escalated person
  - Name
  - DOB
  - Age
  - Height
  - Weight
  - Race/ethnicity
  - Hair color
  - Clothing
  - Identifying marks/items
  - Tattoos
  - Mustache/beard
  - Eye wear
  - Birthmarks
- Give further instructions on your location in building, on perpetrator's location, how to enter and where, are doors locked and need to be unlocked for the officers. Having a floor plan available is advisable in the event of a hostage situation.